IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Eduardo ALDECOA ANITUA							Art Unit: 3775							
Application No.: 10/588,610 Confirmation N					nfirmation No.: 8345			Examine	Examiner: M. J. Lawson					
Filing Date: April 27, 2007							Washington, D.C.							
								Atty.'s D	ocket: ANITI	J A =6				
For: METHOD AND TOOLS FRO LOW-SPEED MILLING WITHOUT								Date: December 9, 2010						
U.S. Patent and Trademark Office Customer Service Window Randolph Building_ 401 Dulany Street Alexandria, VA 22314														
Sir:														
[XX] []	Small No ad		pplicant(s) c quired.	claim small enti	-identified application ty status. See 37 C.f									
		(Col. 1)		(Col. 2)	(Col. 3)		SMALL EN		TY	7	OTHER THA		N SMALL ENTITY	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST N PREVIOUSL PAID FOR	_Y EXTRA		RATE	AC	DITIONAL FEE	OR		RATE	ADDITIONAL FEE	
TOTAL	-	* 8	MINUS	** 20	0	х	26	\$			х	52	\$	
INDEP		* 2	MINUS	*** 3	0	х	110	\$		-	X	220	\$	
FIRST	PRES	SENTATION OF I	MULTIPLE	DEP. CLAIM		 DDITIO NA L	195	STAL \$		OR	+	390 TOTAL	\$ \$	
*** [XX]	The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.													
				·	accordance with 37 C			·		y 37 CFR	1.17	is calculated	d as shown below:	
	Small Entity Response Filed Within [] First - \$ 65.00 [XX] Second - \$ 245.00 [] Third - \$ 555.00 [] Fourth - \$865.00 [] Fifth - \$1175.00 Month After Time Period Set						Other Than Small Entity Response Filed Within [] First - \$ 130.00 [] Second - \$ 490.00 [] Third - \$ 1110.00 [] Fourth - \$ 1730.00 [] Fifth - \$ 2350.00 Month After Time Period Set							
	[]	Less fees (\$) alrea	dy paid for	_ month(s) extension	of time on _			_·					
[] Please charge my Deposit Account No. 02-4035 in the amount of \$							<u></u> ·							
	overpa Extens	ayment to Depos sion of Time fee, Il patent processi	it Account N not covered	No. 02-4035. T d by check or s		request is n but is also ir	ot limitented	ed to paymer I to include a	nt of all fees a Il fees for the ket authorizat	ssociated presenta ion does	l with tion of not ind	this commu extra claim	nication, including any is under 37 CFR §1.16 tissue fees under 37	

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